UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. 009.4002

(New Nonprovisional Applications Under 37 CFR § 1.53(b))

EXPRESS MAIL #ER 311519205 US

TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Tran	smitted herewith is the patent application of () application	identifier of	r (X) first	named	inventor,	Christopher	Pearce	
entitled, for a(n):									
APPARATUS AND METHODS FOR DOCUMENTING MYOCARDIAL ISCHEMIA									
(X)	Original Patent Application.								

(X)	Original	Patent Application.
()	Continu	ing Application (prior application not abandoned):
	()	Continuation () Divisional () Continuation-in-part (CIP)
		of prior application No: Filed on:
	().	A statement claiming priority under 35 USC § 120 has been added to the specification.
Encl	osed are:	
	(X)	Specification: 13 Total Pages.
	(X)	Claims: 11 Total Pages.
		Abstract: 1 Total Page.
		Formal Drawing(s): 3 Total Sheets.
		Informal Drawing(s):Total Sheets.
		Oath or Declaration:
	` ,	(X) A Newly Executed Combined Declaration and Power of Attorney:
		(X) Signed. () Unsigned. () Partially Signed.
		() A Copy from a Prior Application for Continuation/Divisional (37 CFR § 1.63(d)).
		() Incorporation by Reference. The entire disclosure of the prior application, from which a copy of the
		oath or declaration is supplied, is considered as being part of the disclosure of the accompanying
		application and is hereby incorporated herein by reference.
		() Signed Statement Deleting Inventor(s) Named in the Prior Application. (37 CFR § 163(d)(2)).
	()	Power of Attorney.
•	Ò	Associate Power of Attorney.
	(X)	A check in the amount of \$1,958.00 for the Fees associated with this filing.
	Ò	Preliminary Amendment.
	Ò	A Duplicate Copy of this Form for Processing Fee Against Deposit Account.
	()	A Certified Copy of Priority Documents (if foreign priority is claimed).
	(X)	Information Disclosure Statement, Form PTO/SB/08A.
	(X)	Return Receipt Postcard.

CLAIMS AS FILED									
FOR	NO. FILED	NO. EXTRA	RATE	FEE					
Total Claims	79	59	\$18.00	\$1,062.00					
Independent Claims	4	1	\$86.00	\$86.00					
Multiple Dependent Clai	\$0								
Assignment Recording F	\$40.00								
Basic Filing Fee	\$770.00								
			Total Filing Fee	\$1,958.00					

Charge \$ 0 to Deposit Account 50-2091 pursuant to 37 CFR § 1.25. At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 50 -2091.

Respectfully submitted,

Deborah K. Henscheid Reg. No. 35,940

Other:

Correspondence Address:

CUSTOMER NO. 29,906 INGRASSIA FISHER & LORENZ, P.C.

Assignment and Recordation Cover Sheet.

7150 E. Camelback Road

Suite 325

Scottsdale, AZ 85251 Phone: 480-385-5060

480-385-5061 Fax: